

## I. Final text (11.44)

**From: Dr. Merinstein**

**To: Dr. Lisa Cuddy**

**Subject:**

--

Dear Dr. Cuddy,

thank you for taking care of my patients during my absence.

I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.

She participates in her school's track and field's team and is being trained by her father.

She is very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.

When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. She has lost about 10 pounds within the last three months. Amenorrhea has been present in the same time frame. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.

As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.

Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted, her exercises must be decreased and her expectations of herself and her body must abate.

This far I would not suggest medication as the symptoms are not grave enough.

I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.

For further questions you can contact me via email. Thank you very much.

Sincerely, Dr.Merinstein

## II. Collaborative process

Time	Chat	Text	Comments
10.51		<b>Start writing after the horizontal line:</b> <hr/> <b>From:</b> Dr. Merinstein <b>To:</b> Dr. Lisa Cuddy <b>Subject:</b> --	
10.52	Renate Hiss 10:52 AM so how are we going to do this?? should we just seperate the email into parts?? <hr/> Tanja Portlanger 10:52 AM Guess we could do that <hr/> Irmgard Apfel 10:52 AM we could if we agree on the diagnosis <hr/>		

10.53 WM	Renate Hiss 10:53 AM yeah, i think obne could do the general introduction then symptoms and diagnosis? <hr/>		
WM	Tanja Portlanger 10:53 AM yes let's just discuss her symptoms and her diagnosis here in the caht <hr/>		
WM	Irmgard Apfel 10:53 AM and thant treatment <hr/>		
WM	Renate Hiss 10:53 AM okay... <hr/>		
WM	Irmgard Apfel 10:53 AM sorry than <hr/>		
WM	Tanja Portlanger 10:53 AM and then one of us does the introduction one the symptoms and one the diagnosi		

10.54 WM	Irmgard Apfel 10:54 AM ok, symptoms		
WM	Tanja Portlanger 10:54 AM jup		
C	Renate Hiss 10:54 AM did they say anything about weight loss?		
C	Tanja Portlanger 10:54 AM she faints while running and feels dizzy uhm yes I think she mentioned that she lost like 10 pounds		
C	Renate Hiss 10:54 AM self induced vomitting		
	Tanja Portlanger 10:54 AM		

C	in 3 months or so <hr/>		
C	Irmgard Apfel 10:54 AM she binge-eating and is purgiungis <hr/>		
10.55 C	Renate Hiss 10:55 AM really? ithought she's eating like nothing... <hr/>		
C	Tanja Portlanger 10:55 AM i don't think she is really very much binge eating... <hr/>		
C WM	Irmgard Apfel 10:55 AM i think she said so we could listen to it again <hr/>		
C	Tanja Portlanger 10:55 AM she said she vomited once and that she sometimes had a desert or something like this too much...but I don't think you could say from that that she is binge eating <hr/>		

C	Renate Hiss 10:55 AM me neither.. _____		
10.56 C	Irmgard Apfel 10:56 AM ok, sorry, i tought so _____		
C	Tanja Portlanger 10:56 AM we could say that she said what i wrote above and that youd have to further pursue the topic _____		
C ST	Renate Hiss 10:56 AM she also does an excessive amount of sport yeah, thats good! _____		
C	Irmgard Apfel 10:56 AM thant it would be anorexia nervosa as the diagnosis? _____		
	Renate Hiss 10:56 AM		

C	other symptoms? _____		
10.57 C E	Tanja Portlanger 10:57 AM yes and she drinks a lot of diet coke :D hasn't had her period _____		
C	Irmgard Apfel 10:57 AM her leg is hurting _____		
C	Tanja Portlanger 10:57 AM so amenorrhoe _____		
C	Renate Hiss 10:57 AM i think it's a combination but we could agree on anorexia _____		
C	Tanja Portlanger 10:57 AM anorexia as diagnosis? _____		
	Irmgard Apfel 10:57 AM		

C	with bulimia nervosa you most of the time dont loss weight so yes, anorexia _____		
10.58 C	Renate Hiss 10:58 AM and also binge eating always comes with bulimia _____		
C	Irmgard Apfel 10:58 AM yes _____		
C	Tanja Portlanger 10:58 AM but would you already put that as a matter of fact diagnosis _____		
C	Renate Hiss 10:58 AM no but a expected diagnosis? _____		
C	Tanja Portlanger 10:58 AM 'yeah that's good _____		
10.59	Renate Hiss 10:59 AM		

WM C	#0- URF WM	*as so we split up? <hr/>		
	WM	Irmgard Apfel 10:59 AM yes <hr/>		
	C	Tanja Portlanger 10:59 AM therapy plan? <hr/>		
	WM	Irmgard Apfel 10:59 AM i could do that <hr/>		
	C	Tanja Portlanger 10:59 AM yeah but i mean what would you guys suggest as therapy? <hr/>		
	C	Irmgard Apfel 10:59 AM oh sorry <hr/>		
		Renate Hiss 10:59 AM		

WM	i think the person who does the introduction could also do the therapy cause both paragraphs will be rather short! _____		
CI G	Irmgard Apfel 10:59 AM psychotherapie _____		
WM	Tanja Portlanger 10:59 AM alright _____		
11.00 C	Renate Hiss 11:00 AM education on nutrition maybe family therapy _____		
C	Tanja Portlanger 11:00 AM and put her family with her...tell the father that the eercise is becoming an obsession _____		
C	Irmgard Apfel 11:00 AM yes so her father can watch over her exercise		

C	_____ Renate Hiss 11:00 AM exactly! _____		
11.01 C	Tanja Portlanger 11:01 AM adn show to her the affects malnutrition can do to her boday body _____		
C	Irmgard Apfel 11:01 AM she doesn't need medication at that point i think _____		
C	Tanja Portlanger 11:01 AM na don't think so too but she should be weighed every week regularly to watch her weight loss _____		
WM	Renate Hiss 11:01 AM okay, so who wants to write about what? _____		

11.02	Irmgard Apfel 11:02 AM maybe refeeding, if she lost to much _____		
C			
	Tanja Portlanger 11:02 AM and maybe put in the end the sex issue...that she might need contraceptives _____		
C			
	Irmgard Apfel 11:02 AM yes _____		
C			
	Tanja Portlanger 11:02 AM I can do the symptoms _____		
WM			
	Renate Hiss 11:02 AM i could do the introduction _____		
WM			
	Irmgard Apfel 11:02 AM i will do the treatment than _____		
WM			

WM	Renate Hiss 11:02 AM and diagnosis? _____		
11.03 WM	Irmgard Apfel 11:03 AM you? together with the introduction ? _____		
WM	Renate Hiss 11:03 AM okay! so you want the diagnosis before the symptoms? _____		
WM	Tanja Portlanger 11:03 AM no _____		
WM	Irmgard Apfel 11:03 AM no _____		
WM	Tanja Portlanger 11:03 AM introduction symptoms diagnosis therapy _____		

<p>WM</p>	<p>E</p> <p>Renate Hiss 11:03 AM okay :)</p> <hr/> <p>Irmgard Apfel 11:03 AM just one sentence suming it up i think</p> <hr/>		
<p>11.04</p> <p>ST</p> <p>WM</p> <p>WM</p>	<p>Renate Hiss 11:04 AM oh man, that smilie is ugly!</p> <hr/> <p>Tanja Portlanger 11:04 AM But maybe it would be good if we write it one after another</p> <hr/> <p>Renate Hiss 11:04 AM i'll just wirte in word!</p> <hr/>		
<p>11.05</p> <p>WM</p>	<p>Tanja Portlanger 11:05 AM so you put the introduction becci and then i start with the symotims</p> <hr/>	<p><b>From: Dr. Merinstein</b>  <b>To: Dr. Lisa Cuddy</b>  <b>Subject: Dear</b></p>	

<p>WM</p> <p>WM</p> <p>CS</p>	<p>Renate Hiss 11:05 AM okay...</p> <hr/> <p>Tanja Portlanger 11:05 AM because that way we can make sure it fits together and makes sense</p> <hr/> <p>Renate Hiss 11:05 AM how do i start this??</p> <hr/>	<p>--</p>	
<p>CS</p>	<p>11.06 Tanja Portlanger 11:06 AM dear dr.cuddly or whatever the name patients? cause it's actually not only jessica</p> <hr/>	<hr/> <p><b>From: Dr. Merinstein</b>  <b>To: Dr. Lisa Cuddy</b> .  <b>Subject: Dear</b></p> <p>--</p> <p><b>Dear Dr. Cuddy,</b></p>	
<p>11.06</p>		<p><b>From: Dr. Merinstein</b>  <b>To: Dr. Lisa Cuddy</b>  <b>Subject:</b></p> <p>--</p> <p><b>Dear Dr. Cuddy,</b></p>	

		thank you for taking care of my patient	
11.06		<b>From: Dr. Merinstein</b> <b>To: Dr. Lisa Cuddy</b> <b>Subject:</b> -- Dear Dr. Cuddy,  thank you for taking care of my patient during my absence.	
11.06		Dear Dr. Cuddy,  thank you for taking care of my patient during my absence. I#m	
11.06		Dear Dr. Cuddy,  thank you for taking care of my patients during my absence. I#m	
11.07 STE	Renate Hiss 11:07 AM that's what i meant to write ;)	<b>From: Dr. Merinstein</b> <b>To: Dr. Lisa Cuddy</b> <b>Subject:</b> -- Dear Dr. Cuddy,  thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named	

		Jessica. She came to me with her dad beacuse of #m	
11.08 Mo- CDE/E CS	<p>Tanja Portlanger 11:08 AM ;) father? think it should be quite formal _____</p> <p>Renate Hiss 11:08 AM how do i introduce her without taking away your part? ;) _____</p>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father becausedad beacuse of</p>	
11.08		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because-of</p>	
11.09 CS CS	<p>Tanja Portlanger 11:09 AM yeah i was thinking about that as well _____</p> <p>Irmgard Apfel 11:09 AM just tell why she came in the first place _____</p>		

<p>CS</p> <p>CS</p>	<p>Tanja Portlanger 11:09 AM maybe introduction should be more about her family situation and that she is on the running team and all that stuff</p> <hr/> <p>Irmgard Apfel 11:09 AM than tanja can go on with what he found out in the examination?</p> <hr/>		
<p>11.10</p> <p>CS</p> <p>no-UE</p> <p>no-UE</p>	<p>Tanja Portlanger 11:10 AM and that we are very concerned about her that's why we want to mention her ah yeah that's good with previously symptoms i think it's called track and field's team?</p> <hr/> <p>Irmgard Apfel 11:10 AM maybe not some symptoms but be clear and write: because she has been fainting during exercise</p> <hr/>	<p><b>Dear Dr. Cuddy,</b></p> <p><b>thank you for taking care of my patients during my absence.</b></p> <p><b>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</b></p> <p><b>She participates in her school's running team which is trained by her father. because</b></p>	
<p>11.10</p>		<p><b>Dear Dr. Cuddy,</b></p> <p><b>thank you for taking care of my patients during my</b></p>	

		<p>absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's running team which is trained by her father.</p>	
11.10		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team which is trained by her father.</p> <p>She</p>	
11.11	<p>Tanja Portlanger 11:11 AM and i think her father only is her trainer not the trainer of the whole team?</p> <p>_____</p> <p>Renate Hiss 11:11 AM really? oh what's the word for ehrgeizig</p> <p>_____</p>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team and is being trained by her father.</p>	

		She	
11.12		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis</p>	
11.13		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about bad influences on her health.</p>	
11.14	<p>Tanja Portlanger          11:14 AM</p> <p>ambitious          excessive exercise?          effects on her health would be more fitting?</p>	<p>From: Dr. Merinstein          To: Dr. Lisa Cuddy          Subject:          --          Dear Dr. Cuddy,</p>	

Two-UE  
 Two-UE  
 Two-UE

CS	<p>_____</p> <p>Renate Hiss 11:14 AM anything else? her relationship maybe ?</p> <p>_____</p>	<p><b>thank you for taking care of my patients during my absence.</b></p> <p><b>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</b></p> <p><b>She participates in her school's track and field's team and is being trained by her father.</b></p> <p><b>She's very ambitious and exercises on a daily basis, unconcerned about <del>effects</del>bad influences on her health.</b></p>	
<p>11.15</p> <p>CS</p> <p>CS</p> <p>CS</p> <p>CS</p>	<p>Tanja Portlanger 11:15 AM hmm yes you could say that her father is very proud? i don't think we should mention her boyfriend...</p> <p>_____</p> <p>Renate Hiss 11:15 AM okay</p> <p>_____</p> <p>Irmgard Apfel 11:15 AM i don't know wether thats important for the treatment in the next four month yes</p> <p>_____</p>		

11.16		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training behaviour (?) is fortified due to her father's high expectations and reward by</p>	
11.17		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training behaviour (?) is fortified due to her father's high expectations and reward by appreciation of h</p>	
11.17		<p>Dear Dr. Cuddy,</p>	

		<p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training behaviour (?) is fortified due to her father's high expectations and rewarded by appreciation of her successes</p>	
11.17		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training routinebehaviour (?) is fortified due to her father's high expectations and rewarded by appreciation of her success.es</p>	

<p>11.18 No-UE FO-UE FO-UE</p> <p>No-UE [</p> <p>No-UE [</p> <p>No-UE [</p>	<p>Tanja Portlanger 11:18 AM training routine i think success is a singular word and i think it's appreciation for sth....</p> <hr/> <p>Renate Hiss 11:18 AM i still don't like the routine... routine can not be fortified, behaviour can</p> <hr/> <p>Tanja Portlanger 11:18 AM hmm yeah...</p> <hr/> <p>Renate Hiss 11:18 AM but there is no such thing like training behaviour...</p> <hr/>		
<p>11.19 No-UE [</p> <p>No-UE [</p>	<p>Irmgard Apfel 11:19 AM habbits maybe</p> <hr/> <p>Tanja Portlanger 11:19 AM her training attitude?</p> <hr/>	<p><b>Dear Dr. Cuddy,</b></p> <p><b>thank you for taking care of my patients during my absence.</b></p> <p><b>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during</b></p>	

<p>11.19</p>	<p>_____</p> <p>Renate Hiss 11:19 AM haha, i wrote that at the same time ;)</p> <p>_____</p>	<p><b>physical exercise.</b>  <b>She participates in her school's track and field's team and is being trained by her father.</b>  <b>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</b></p>	
<p>11.19</p>		<p><b>Dear Dr. Cuddy,</b></p> <p><b>thank you for taking care of my patients during my absence.</b>  <b>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</b>  <b>She participates in her school's track and field's team and is being trained by her father.</b>  <b>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</b></p>	
<p>11.20</p>	<p>Tanja Portlanger 11:20 AM but the fortified does no fit with attitude either does it? well yeah right probably does</p> <p>_____</p> <p>Renate Hiss</p>		

11.19  
11.20

11.20

Ho- WM Ho- WM Ho- WM WM WM	l	11:20 AM hm		
	WM	Irmgard Apfel 11:20 AM 15 minutes left		
	Ho- WM	Tanja Portlanger 11:20 AM let's leave it like that oh shit		
	Ho- WM	Renate Hiss 11:20 AM ihre einstellung wird verstärkt? ups! okasy, symptoms!		
	WM	Irmgard Apfel 11:20 AM just go on, well talk about that later		
	WM	Tanja Portlanger 11:20 AM i will start with symptoms? and let's read through it again later		

<p>11.21</p> <p>WM E</p> <p>WM E</p>	<p>Irmgard Apfel 11:21 AM i will start my part as well, your english is better than mine, please jump in and correct me ;-)</p> <hr/> <p>Renate Hiss 11:21 AM okay ;)</p> <hr/>	<p><b>Dear Dr. Cuddy,</b></p> <p><b>thank you for taking care of my patients during my absence.</b></p> <p><b>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</b></p> <p><b>She participates in her school's track and field's team and is being trained by her father.</b></p> <p><b>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</b></p> <p><b>When she presented in my office with her father they were complaining about her fa</b></p>	
<p>11.21</p>		<p><b>Dear Dr. Cuddy,</b></p> <p><b>thank you for taking care of my patients during my absence.</b></p> <p><b>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</b></p> <p><b>She participates in her school's track and field's team and is being trained by her father.</b></p> <p><b>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</b></p>	

		<p>When she presented in my office with her father they were complaining about her <b>having fainted twice during exercise within the past two weeks.</b></p>	
11.21		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p> <p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. <b>She said fainting always came along w</b></p> <p>As for her treatment i would suggest a cognitiv-behavioral-thr</p>	
11.22 ST	Irmgard Apfel 11:22 AM thanks _____	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence.</p> <p>I am presenting you with a 14 year old girl named Jessica.</p> <p>She came to me with her father because of some symptoms</p>	

		<p>that previously occurred during physical exercise.          She participates in her school's track and field's team and is being trained by her father.          She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.          When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her da</p> <p>FAs for her treatment i would suggest a cognitive-cognitiv-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. Hthr</p>	
11.23		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.          She participates in her school's track and field's team and is being trained by her father.          She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.          When she presented in my office with her father they were</p>	

		<p>complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she doesn't have breakfast, for lunch only fruit</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. Her weight must be un-</p>	
11.23		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she doesn't have breakfast, for lunch only fruit</p>	

		<p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. Her weight must be un</p>	
11.23		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. Her weight must be under close</p>	

		control (better word?). Also her nutrition must be reconverted a	
11.23		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. Her weight must be under close monitoringcontrol (better word?). Also her nutrition must be reconverted and her</p>	

11.24		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after eating. She is not aware of this being a problem for her health.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. Her father has to- Her weight must be under close monitoring. Also her nutrition should must be reconverted and her exercises must be decreased.</p>	
-------	--	---	--

<p>11.25</p> <p>WM E SK CS</p>	<p>Renate Hiss 11:25 AM just continue, i'll correct all the typos ;) ah what did i do?? _____</p> <p>Tanja Portlanger 11:25 AM is there something else with symptoms? _____</p>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after <b>mealseating</b>. She is not aware of this being a problem for her health.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. <b>She has to accepted her body and needs to leardn</b><del>Her father has to</del> Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p>	
--	---	---	--

<p>11.26</p> <p>CS</p> <p>MW</p> <p>UKE</p> <p>HAC -</p> <p>UKE</p>	<p>Renate Hiss 11:26 AM am...</p> <hr/> <p>Tanja Portlanger 11:26 AM causing problems 'na</p> <hr/> <p>Renate Hiss 11:26 AM however your write this stuff... amenorrhea</p> <hr/>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of this <del>being being</del> a problem (a thread?) for her health.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. She has to accepted her body and needs to learn how to balance eating habbits and exercises. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises</p>	
---	---	---	--

		<p>must be decreased.</p> <p>As far I would not suggest medication as the</p>	
11.26		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of this being a problem (posing a thread?) for her health.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. She has to accepted her body</p>	

		<p>and needs to learn how to balance eating habits and exercises. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>As far I would not suggest medication as the symptoms a</p>	
11.26		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of this being a problem (posing a threat?) for her health.</p>	

		<p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. She has to accepted her body and needs to learn how to balance eating habbits and exercises. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>As far I would not suggest medication as the symptoms are not</p>	
<p>11.27</p> <p>Mo- UE G</p> <p>Mo- UE</p>	<p>Tanja Portlanger          11:27 AM          i am thinking about something like          sie ist sich der ausmaße oder der          folgen nicht bewusst          but i can't come up with a good          english expression          the extent of her behaviour</p> <hr/> <p>Irmgard Apfel          11:27 AM          she isnt clear about the          consequences of her behavior</p> <hr/>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of this being a problem (posing a thread?) for her</p>	

		<p>health.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. She has to accepted her body and needs to learn how to balance eating habbits and exercises. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>As far I would not suggest medication as the symptoms are not <del>not</del></p>	
<p>11.28</p> <p>to be</p> <p>no- UK</p> <p>no- UK</p>	<p>Tanja Portlanger 11:28 AM consequences is good</p> <hr/> <p>Renate Hiss 11:28 AM maybe misbehaviour?</p> <hr/> <p>Tanja Portlanger 11:28 AM abit judging i think...</p> <hr/>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only</p>	

		<p>fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the <del>consequences her behaviour might have.</del>  <del>is being a problem (posing a thread?) for her health.</del></p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. She has to accepted her body and needs to learn how to balance eating habbits and exercises. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>As far I would not suggest medication as the symptoms are not <del>so grave yet</del></p>	
11.28		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were</p>	

		<p>complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. She has to accepted her body and needs to learn how to balance eating habits and exercises. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>As far I would not suggest medication as the symptoms are not so grave yet.</p>	
<p>11.29</p> <p>to- UKE</p>	<p>Renate Hiss          11:29 AM          okay</p> <hr/>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training</p>	


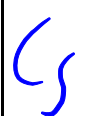

		<p>attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in h</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and although in sessions with other affected patients. She has to accepted her body and needs to learn how to balance eating habbits and exercises. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>As far I would not suggest medication as the symptoms are not so grave yet.</p>	
<p>11.30</p> <p>ms URF</p>	<p>Tanja Portlanger          11:30 AM          maybe grave enough inka?          irmgard          sorry</p>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p>	

		<p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose anorexia nervosa</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well although in sessions with other affected patients. She has to accept ed her body and needs to learn how to balance eating habits and exercises. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>As far I would not suggest medication as the symptoms are not so grave yet.</p>	
11.30		Dear Dr. Cuddy,	


		<p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose anorexia nervosa</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p>	
--	--	---	--

		This far As far I would not suggest medication as the symptoms are not so grave yet.	
few- one	11.31 / few- one	Irmgard Apfel 11:31 AM yes I dont like that last sentence but i dont know how to do it different  Tanja Portlanger 11:31 AM with anorexia there is a restricted type and a binge eating type  Renate Hiss 11:31 AM so restricted i think?  Tanja Portlanger 11:31 AM we could say in the diagnosis that she seems to belong to the restricting type but also has vomited	Dear Dr. Cuddy,  thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.  As temporary diagnosis I propose anorexia nervosa with additional self-induced vomiting.  For her treatment I would suggest a cognitive-behavioral- therapy, done as a family therapy and as well in sessions

		<p>with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>This far I would not suggest medication as the symptoms are not <del>so</del> grave enough.yet.</p>	
<p>11.32</p> <p>G</p> <p>G</p> <p>G</p> <p>G</p>	<p>Irmgard Apfel 11:32 AM yes and that we are not sure whether shes going to vomited more often _____</p> <p>Tanja Portlanger 11:32 AM yeah that's good renate _____</p> <p>Irmgard Apfel 11:32 AM so we try to go on with the treatment bevor she starts to vomit regularry? _____</p> <p>Renate Hiss 11:32 AM yes _____</p>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p>	

		<p>As temporary diagnosis I propose <b>restricting type of</b> anorexia nervosa with additional self-induced vomiting.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>This far -I would not suggest medication as the symptoms are not grave enough.</p>	
<p>11.33</p> <p></p> <p></p> <p></p>	<p>Tanja Portlanger 11:33 AM Irmgard you could put in your therapy that you suggest talking to her about contraceptives and aufkl#ären?=?</p> <hr/> <p>Irmgard Apfel 11:33 AM ok</p> <hr/> <p>Renate Hiss 11:33 AM to stop her behaviour before...</p> <hr/>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her.</p>	

		<p>She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>A treatment is aFor her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>This far I would not suggest medication as the symptoms are not grave enough.</p>	
11.33		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were</p>	

		<p>complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>A treatment <del>is indicated so she does not go onis-a</del>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough.</p>	
11.34 	Irmgard Apfel 11:34 AM can you do it ok, thanks <hr/>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father.</p>	

		<p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p><del>A treatment is indicated so she does not go on</del>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>Thank you very much fr yo</p>	
--	--	---	--

11.34	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her</p>	
-------	--	--

		<p>nutrition should be reconverted and her exercises must be decreased.</p> <p>This far I would not suggest medication as the symptoms are not grave enough.</p> <p>For further questions you can contact me via email. Thank you very <del>Thank-you-very-much-fr-ye</del></p>	
11.34		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At</p>	

		<p>the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to sFor her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
11.34		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis,</p>	

		<p>unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to start For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>Also</p> <p>For further questions you can contact me via email. Thank</p>	
--	--	--	--

		<p>you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
<p>11.35</p> <p>GS</p> <p>STE</p> <p>E</p>	<p>Tanja Portlanger 11:35 AM i think it was fine before irmgard... i wouldn't write that part with stopping her from...or` ?</p> <hr/> <p>Irmgard Apfel 11:35 AM i was looking for rthe sentencs renate is doing right now ;-)</p> <hr/>	<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father. She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success. When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started <del>immediately</del>immediatly to</p>	

		<p>stop her behaviour before she starts vomiting frequently.<del>spo</del>For her treatment I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased.</p> <p>This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contracAlso</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
11.35		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father.</p> <p>She's very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p>	

		<p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the</p> <p>For further questions you can contact me via email. Thank you very much.</p>	
--	--	--	--

		Sincerely, Dr.Merinstein	
11.36	<p>Tanja Portlanger 11:36 AM yes that's good but the therapy is not primarily to stop her from vomiting but to make her stick to a healthy nutrition</p> <hr/> <p>Renate Hiss 11:36 AM maybe because she had unprotected sexual intercourse beforeß</p> <hr/> <p>Irmgard Apfel 11:36 AM what means</p> <hr/> <p>Tanja Portlanger 11:36 AM yes that's good</p>	<p>...</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough. I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
11.36		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise.</p>	

		<p>She participates in her school's track and field's team and is being trained by her father.</p> <p>She <del>is's</del> very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as</p>	
--	--	--	--

		<p>she has a boyfriend and is not aware of the risk of unprotected sex.</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
11.37		<p>...</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sex intercourse.-</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	

<p>11.40</p> <p>ST</p>	<p>Irmgard Apfel          11:40 AM          thanks :D          i was going to correct that this minute</p> <hr/>	<p>...</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
<p>11.42</p> <p>Mo- UKI</p>	<p>Renate Hiss          11:42 AM          has been present in the same time frame</p> <hr/>	<p>...</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. She has lost about 10 pounds within the last three months. Amenorrhea is</p>	

		<p>also present for three months. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased and her expectations must -</p> <p>This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
--	--	--	--

11.43		<p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. She has lost about 10 pounds within the last three months. Amenorrhea has been present for the same time frame <del>is also present for three months</del>. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased and her expectations must <b>abate</b></p> <p>This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.</p>	
-------	--	---	--

		<p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
11.43		<p>...</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. She has lost about 10 pounds within the last three months. Amenorrhea has been present in for the same time frame. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be</p>	

		<p>under close monitoring. Also her nutrition should be reconverted and her exercises must be decreased and her expectations must abate</p> <p>This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
11.43		<p>...</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted, <del>and</del> her exercises must be decreased and her expectations must abate.</p> <p>This far I would not suggest medication as the symptoms are</p>	

		<p>not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
<p>11.44</p> <p>to- LKE</p> <p>to- LKE</p> <p>to- LKE</p> <p>to- LKE</p>	<p>Irmgard Apfel 11:44 AM ihre erwartungen an sich müssen abnehmen? how to say that? her expectations of herself must abate?</p> <hr/> <p>Renate Hiss 11:44 AM no.. wait...</p> <hr/> <p>Tanja Portlanger 11:44 AM on herself i think</p> <hr/> <p>Irmgard Apfel 11:44 AM</p>	<p>...</p> <p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>• Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted, her exercises must be decreased and her expectations <b>on herself</b> must abate.</p> <p>This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.</p>	

<p>4 F0 ✓ F0</p>	<p>ok _____  Tanja Portlanger 11:44 AM no of _____  Irmgard Apfel 11:44 AM No? ok</p>	<p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
<p>11.44</p>		<p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted, her exercises must be decreased and her expectations on herself <b>and her body</b> must abate. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.</p>	

		<p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
11.44		<p>Dear Dr. Cuddy,</p> <p>thank you for taking care of my patients during my absence. I am presenting you with a 14 year old girl named Jessica. She came to me with her father because of some symptoms that previously occurred during physical exercise. She participates in her school's track and field's team and is being trained by her father.</p> <p>She is very ambitious and exercises on a daily basis, unconcerned about effects on her health. Her training attitude is fortified due to her father's high expectations and rewarded by appreciation of her success.</p> <p>When she presented in my office with her father they were complaining about her having fainted twice during exercise within the past two weeks. She said fainting always came along with a feeling of dizziness. When asked about her daily diet she said she does not have breakfast, for lunch only fruits or salad and in the evening her mother cooks for her. She also mentioned drinking a lot of diet coke. She has lost about 10 pounds within the last three months. Amenorrhea has been present in the same time frame. Jessica admitted having vomited once or twice after meals. She is not aware of the consequences her behaviour might have. At the same time she feels pain in her right knee.</p>	

		<p>As temporary diagnosis I propose restricting type of anorexia nervosa with additional self-induced vomiting.</p> <p>Her treatment should be started immediately to stop her behaviour before she starts vomiting frequently. I would suggest a cognitive-behavioral-therapy, done as a family therapy and as well in sessions with other affected patients. She has to accept her body and needs to learn how to balance eating habits and exercise. Her weight must be under close monitoring. Also her nutrition should be reconverted, her exercises must be decreased and her expectations of herself and her body must abate. This far I would not suggest medication as the symptoms are not grave enough.</p> <p>I would also suggest talking to her about contraceptives as she has a boyfriend and is not aware of the risk of unprotected sexual intercourse.</p> <p>For further questions you can contact me via email. Thank you very much.</p> <p>Sincerely, Dr.Merinstein</p>	
--	--	--	--